



JOHN J. SCHULTE, CHIEF

## Grosse Pointe Shores Department of Public Safety

POLICE/DETECTIVE BUREAU

(313) 881-5500

FAX (313) 640-1661

ADMINISTRATION

(313) 881-5501

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### GPS Observation Program



#### **Private Video Surveillance Camera Registration**

Do you currently have video surveillance at your home? If so, we would like you to become part of the Grosse Pointe Shores Video Observation Program.

Video surveillance is one of the best methods to apprehend criminals and convict suspects in the act of committing a crime. Installing video surveillance is an excellent step toward helping to secure and protect your home, but it can also help the police protect your neighborhood.

#### **How does it work?**

The GPS is committed to our partnership with residents. Many residents operate

surveillance systems at their businesses and/or homes. As crimes occur nearby, citizens are not always aware their system may have captured information that could help solve the crime and keep our community safer. In addition, police are not always aware who may have this potentially vital information.

The Police Department is asking residents throughout the Village to register their privately owned surveillance camera systems. If an incident happens in the vicinity of your camera system, you will be contacted by our detective bureau and we will request that you review your video to determine if there is any valuable information. There is no requirement to give access to your video system to the police department.

### **What are the benefits of registering your camera?**

By registering, the police department can quickly identify nearby cameras that may have captured criminal activity. You would only be contacted by the Police Department if there is an incident in the vicinity of your security camera. Police personnel, if necessary, may request that you review your camera footage to assist in the investigation and determine if any part of the incident was captured by your video. If a home is broken into, a car is stolen, or the worst case of all, a child goes missing, your video may be the difference in a quick resolution to the incident. A video partnership with our residential community will greatly assist the police in their investigations.

### **Registration**

To register your video surveillance and allow officers to contact you, should an incident occur in or near where your cameras are installed, we kindly ask you to notify our department clerk @ 881-5500 so that we can send you a registration form. Public Safety Officers can assist you if necessary with the completion of the registration form.

### **Asking for your help**

If you have purchased a HD video system and you are pleased with the product and service from the vendor, please let us know so that we can provide that information to other residents who may be considering the purchase of a video system.

Respectfully,

John J. Schulte

Chief of Police



# Village of Grosse Pointe Shores

## Department of Public Safety



### Residential Security Camera Systems Questionnaire

Resident Last Name:		
Resident First Name:		
Resident Street Address:		
Resident Phone Number:	Home:	
	Cell:	
Resident Email Address:		

Street Address of Camera Location:	
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Please indicate the views your camera provides:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Interior view | <input type="checkbox"/> Driveway            | <input type="checkbox"/> East side of house |
| <input type="checkbox"/> Exterior view | <input type="checkbox"/> Street view         | <input type="checkbox"/> West side of house |
| <input type="checkbox"/> Front yard    | <input type="checkbox"/> North side of house |   |
| <input type="checkbox"/> Back yard     | <input type="checkbox"/> South side of house |   |

Please indicate the type of images your camera provides:

- |                                       |  |  |
|---------------------------------------|--|--|
| <input type="checkbox"/> Video        | <input type="checkbox"/> Color           | <input type="checkbox"/> High definition |
| <input type="checkbox"/> Still images | <input type="checkbox"/> Black and white | <input type="checkbox"/> Sound           |

Brand/Make or Model of Camera System:		
Would you recommend Vendor/Installation Provider:	Yes	No
Name of Vendor/Installation Provider:		
Contact Number for Vendor/Installation Provider:		

**Additional Comments:**

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